## KENTUCKY LEGISLATIVE ETHICS COMMISSIO



STATEMENT OF FINANCIAL DISCLOSURE (KRS 6.781)

To be filed by: All members of the General Assembly, all condidates and nominees for election to the

General Assembly, and major management pe	ersonnel in the legislative branch of state government.
☐ Check here and attach additional sheets if	f necessary Number of sheets attached.
Please include the following informs	ation for the preceding calendar year:
	Anita Y Isaacs
Name	2007 100 2017 20 20 20 100 100 100 100 100 100 100 10
Business address	3236 Highbidge Drive Taylor Hill XY 6101
Business telephone 275 Hawter	idge Dr Taylor Mill XX 41015
Home address	
Title of public position, or office sought_	House Representative
Other occupations of filer	Homenakor Physician
Occupations of spouse	Physician
NOTE: The following sections do not requ	dre disclosure of specific dollar amounts.
t. Positions held by filer's spouse in any	business, partnership, corporation for profit, or
corporation not for profit from which the	e filer's spouse receives compensation, and the poration MA
Names and addresses of all businesses iler's spouse, or filer's minor children ha atcress of \$10,000 at fair market value, o	s, investments, or securities in which the filer, and at any time during the reporting year an or 5% ownership interest or more R/A

	and form of gross income of the filer (list sources by name)
Sources Concont.	and form of gross income of the filer's spouse (list sources by name) ra Urgont Care Salary
Positions	of a fiduciary nature held by the filer in a business
h <del>er</del> than I	nation as commercial, residential, or rural, and the location of all real proper he filer's primary residence, in which there is an interest of \$10,000 or more filer, filer's spouse, or filer's minor children
r de Chi	of gifts of money or property with a retail value of more than \$200 to the file to modiate family, except those from a member of the filer's family. (Family, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter consent, or grandchild, or dependent member of the filer's household.  To mily means unemancipated child residing in an individual's household.

	of consumer goods. (Goods used or bought for use primarily for personal, household purposes)  Mortgage
	Guardian Savings Bank
10. The n	ame of any legislative agent who is:
(a)	A member of the filer's immediate family; N/A
(b) (c)	A partner of the filer, or a partner of a member of the filer's immediate family. An officer or director of the filer's employer; M/A
	An employer of the filer or an employer of a member of the filer's immediate family;
(e)	A business associate of the filer or a business associate of a member of the filer's immediate family $\mathbb{R}/\mathbb{A}$
Nonu	of these are applicable
11. The	names of any of the filer's clients who are legislative agents or employers
<del></del>	
12. If yo	to have held a professional license during the filing period, has a properly partner of yours engaged in the practice of cases or other matters which you are

<ol> <li>If yes, list the names of the partner made an appearance.</li> <li>before a specific agency.</li> </ol>	e clients represented and list the agencies before which the The filer need not identify which client was represented
Clients	
	N/A
State Agency	
	N/A
Upon receipt by the Commi record available for copying.	NOTICES ssion, a statement of financial disclosure shall be a public
2. Any person who fails to file a deficiency identified by the Coto exceed \$100 per day up to a r	a statement of financial disclosure or who fails to remedy ommission in a timely manner may be fined an amount not maximum total fine of \$1000.
<ol> <li>Any person who files a state false information, or to omit req inisdemeanor.</li> </ol>	ment of financial interests which they know to contain mired information, shall be guilty of a class A
02/24/2022	Anita Y Isaacs
Diffe	Filer
Scod completed statements to:	The Kentucky Legislative Ethics Commission 22 Mill Creek Park Frankfort, Kentucky 40601 FAX (502) 573-2929
lifyou have questions please call	us at (502) 573-2863
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